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<p><i>Effective on 12/08/2004</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2007</h3>		<p><b>Complete if Known</b></p>	
<input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27		Application Number	10/631,844-Conf. #1040
		Filing Date	August 1, 2003
		First Named Inventor	Kazutaka OKUZAKO
		Examiner Name	M. Sabouri
		Art Unit	2617
TOTAL AMOUNT OF PAYMENT		(\$)	1,360.00
		Attorney Docket No.	1247-0521P

**METHOD OF PAYMENT** (check all that apply)

☐ Check   
 ☐ Credit Card   
 ☐ Money Order   
 ☐ None   
 ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account   
 Deposit Account Number: 02-2448   
 Deposit Account Name: Birch, Stewart, Kolasch & Birch,

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below   
 ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   
 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
_____	_____	_____	_____	_____
- = _____		x _____	= _____	_____
HP = highest number of total claims paid for if greater than 20				

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____
- = _____		x _____	= _____
HP = highest number of independent claims paid for if greater than 3			


**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____
- 100 = _____		/50 = _____ (round up to a whole number) x _____	= _____	

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37	790.00
1253 Extension for response within third month	570.00

<b>SUBMITTED BY</b>		Registration No.	29,271	Telephone	(703) 205-8000
Signature		(Attorney/Agent)			
Name (Print/Type)	Charles Gorenstein	Date	July 23, 2007		

  
C/G/E/W/bms